

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P37407 (4)**
1. Corporation Name
CANTEX INC.



Principal Place of Business: **2101 SE 1 STR MINERAL WELLS TX 76067 US**
Mailing Address: **PO BOX 340 MINERAL WELLS TX 76067 US**

3. Date Incorporated or Qualified: **02/07/1992**
3a. Date of Last Report: **04/25/1995**

2. Principal Place of Business: **21** Suite, Apt. #, etc.
22. City & State: **23**
24. Zip: **25** Country: **26**
27. Mailing Address: **28** Suite, Apt. #, etc.
29. City & State: **30**
31. Zip: **32** Country: **33**

4. FEI Number: **13-3645159**
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent: **C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324**
10. Name and Address of New Registered Agent: **81 Name: [Blank] 82 Street Address (P.O. Box Number is Not Acceptable): [Blank] 83 [Blank] 84 City: [Blank] FL 85 Zip Code: [Blank]**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	C <input checked="" type="checkbox"/> DELETE	1.1 TITLE	Chairman of the Board <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NOGUCHI, SHIGERU	1.2 NAME	HISAYOSHI UNO
STREET ADDRESS	3 CHOME, CHIYODA-KU	1.3 STREET ADDRESS	3 CHOME, CHIYODA-KU
CITY-ST-ZIP	TOKYO JA	1.4 CITY-ST-ZIP	TOKYO, JA
TITLE	PCEO <input checked="" type="checkbox"/> DELETE	2.1 TITLE	Vice Chairman of the Board <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEVINE, GEORGE M	2.2 NAME	LEVINE, GEORGE M.
STREET ADDRESS	2101 SE 1 STR	2.3 STREET ADDRESS	2101 SE 1st St
CITY-ST-ZIP	MINERAL WELLS TX	2.4 CITY-ST-ZIP	MINERAL WELLS, TX 76067
TITLE	V <input checked="" type="checkbox"/> DELETE	3.1 TITLE	Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HORIKAWA, TAKASHI	3.2 NAME	Yumoto, Kiyoshi
STREET ADDRESS	2101 SE 1 STR	3.3 STREET ADDRESS	2101 SE 1st St
CITY-ST-ZIP	MINERAL WELLS TX	3.4 CITY-ST-ZIP	MINERAL WELLS, TX 76067
TITLE	VOT <input type="checkbox"/> DELETE	4.1 TITLE	
NAME	WALLS, RICHARD D	4.2 NAME	
STREET ADDRESS	2101 SE 1 STR	4.3 STREET ADDRESS	
CITY-ST-ZIP	MINERAL WELLS TX	4.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	5.1 TITLE	President & CEO <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WIRTANEN, DON W	5.2 NAME	WIRTANEN, DON W.
STREET ADDRESS	2101 SE 1 STR	5.3 STREET ADDRESS	2101 SE 1st St
CITY-ST-ZIP	MINERAL WELLS TX	5.4 CITY-ST-ZIP	MINERAL WELLS, TX 76067
TITLE	V <input type="checkbox"/> DELETE	6.1 TITLE	
NAME	MCGREGOR, JIM R	6.2 NAME	
STREET ADDRESS	2101 SE 1 STR	6.3 STREET ADDRESS	
CITY-ST-ZIP	MINERAL WELLS TX	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Richard D. Walls Date: 02/21/96 Payline Phone #: 011321-3300

CORP-34 (12/95)